

# NHS Workforce Race Equality Standard (WRES)

**Annual Report 2025** 

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#### 1. Introduction

The Workforce Race Equality Standard (WRES) was mandated through the NHS standard contract from 2015/16. The WRES comprises nine specific metrics to compare the profile and experiences of Black, Asian, and Minority Ethnic (BAME) and White staff within an NHS organisation. The purpose of the indicators is to inform a local action plan that will target specific areas within a given organisation where the treatment or experience of BAME staff is less than good. The WRES indicators will also enable the organisation to demonstrate progress in areas where the treatment of BAME staff needs to improve; and facilitate challenge where progress is not being made.

### 2. Executive summary

#### **WRES Summary Chart**

Indicators	WRES Indicator description	Compared with last year
Indicator	BAME workforce	8.2% Total workforce
1	BAME staffing across the bands	
Indicator	Likelihood of White staff appointed from	2.02 (twice as likely than
2	shortlist	BAME staff being appointed)
Indicator	Likelihood of BAME Staff entering a	2.07 (twice as likely than
3	formal disciplinary process	white).
Indicator	likelihood of white staff accessing non	BAME staff 0.99 (parity)
4	mandatory training/CPD compared with	
	BAME staff	
Indicator	percent of BAME staff experiencing	33%
5	harassment, bullying or abuse from	
	patients or public	2004
Indicator	Percentage of BAME staff experiencing	22%
6	harassment, bullying or abuse from staff	440/
Indicator	Percentage of staff believing that Trust	44%
7	provides equal opportunities for career	
Indicator	progression or promotion	13%
8	Percentage of BAME staff personally experiencing discrimination at work from	13%
	a manager / team leader or other	
	colleagues	
Indicator	BAME (voting) board membership	2.9% Board ethnic
9	, 0,	composition relative to the
		workforce, a difference (Total
		board - Overall workforce)

Last year's action plan aimed to drive targeted improvements across key performance areas; however, it did not deliver the level of progress we were seeking. While some initiatives provided useful insights, the overall impact fell short of expectations due to gaps in implementation consistency, monitoring, and follow-up evaluation.

We have taken these learnings forward and are now developing a revised and strengthened action plan for 2026–27. This new plan will focus on achieving sustainable improvements through clearer accountability, measurable milestones, and regular review mechanisms. As part of this process, we are conducting a series of deep dives to better understand underlying issues and identify practical, evidence-based solutions.

The findings from these reviews will inform the new action plan, ensuring that our priorities are more sharply focused, actions are clearly defined, and progress is closely tracked throughout the year. The aim is to move from reflection to measurable improvement, with a renewed emphasis on collaboration, data-driven decision-making, and continuous learning.

### Indicator 1 BAME staffing across the bands

In 2025 (as of 31st March) there were **4744 staff** on ESR payroll excluding volunteers, students, and any honorary positions. Last year it was 4738 (as of 31st March 2024), (-8) no significant change.

White= 4200 = 88.5%. Last year 88.1%

BAME= 390 = 8.2% Total workforce, Last year 6.7%. Increase of 1.5%

Not declared = 154 = 3.2%. Last year 4.9%, increase of 1.7% in declaration

We have surpassed our target of a 1% increase every year for the next 3 years. We have implemented via our Trac system (recruitment system) understanding how to use it effectively for monitoring performance at each stage of the recruitment process. In addition, we have implemented the Inclusive Recruitment programme to help attracting a more diverse workforce. We recognise more is required and being more precise in our actions.

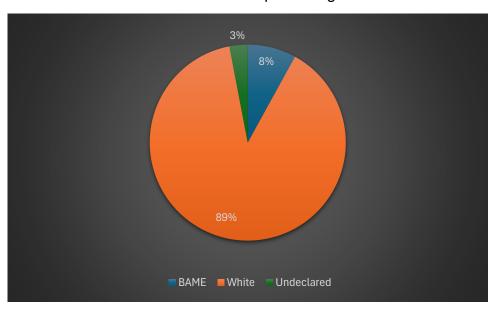


Chart 1 All staff percentage

Most of our staff (88.53%) are white, 8.22% are BAME and 3.25% are undeclared where their ethnicity is unknown. The Ethnic minority population of the geography we serve as an average is 9.7%.

The charts (2 & 3) are a further split of the BAME and white workforce by clinical and non-clinical roles and their bands.

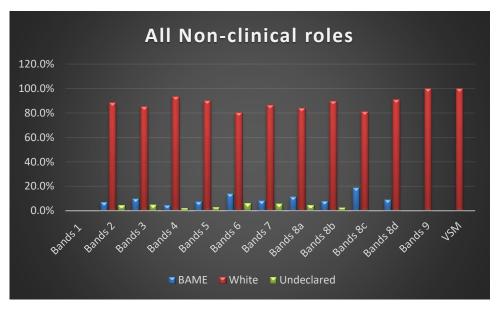


Chart 2 All staff percentage in non-clinical roles

The data shows across all non-clinical roles BAME representation is generally low in senior pay bands, with none in Bands 9 and VSM (Very Senior Management), which are 100% White. The highest BAME presence is seen in Bands 6 (14.0%) and 8c (18.8%). All bands have a high proportion of White staff, particularly from Band 4 upwards. The proportion of staff with undeclared ethnicity remains relatively low across all bands. This data indicates a clear underrepresentation of BAME staff in senior roles.



Chart 3 All staff percentage in Clinical roles

In all Clinical roles BAME representation is concentrated mainly in mid-level pay bands, with the highest presence in Band 5 (15%) and Band 8c (25%). There is no BAME representation in Bands 8a–8b, 8d, 9, or VSM. Senior bands (8a and above) are overwhelmingly White, with several bands at 100% White representation. A small percentage of staff in Bands 5–7 did not declare their ethnicity. Overall, the data highlights a lack of ethnic diversity senior leadership levels.

### **Indicator 2 Shortlisting of BAME applicants**

- This year the relative likelihood of white staff being appointed from shortlisting compared to BAME staff was 2.02, a slight progression for BAME staff being appointed from last year (2.77). A figure above "1" indicates that white candidates are more likely than BAME candidates to be appointed from shortlisting
- Nationally across all NHS Trusts White applicants were 1.62 times more likely to be appointed from shortlisting compared to BAME applicants. We are not as good as the "all" NHS Trusts average.

SHORTLISTING OF BAME APPLICANTS

2.77

1.49

1.49

1.47

NHS Ave.(1.62)

2023

2024

2025

Chart 4 Likelihood of White staff appointed from shortlists

 Shortlisting BAME applicants is not just about meeting quotas or fulfilling legal obligations; it's about fostering an inclusive environment that benefits the Trust and society. It helps to counteract bias, promote diversity, and ensure that everyone has a fair chance to succeed.

2022

2021

 We will Provide and promote career pathways specifically for underrepresented (BAME) groups and ensure adequate consideration of equality within our recruitment process. We will do this by reviewing current interview and recruitment process to promote values and behaviours, and ensure equality and inclusion, in collaboration with staff networks

#### Indicator 3 Likelihood of BAME Staff entering a formal disciplinary process

- This year the relative likelihood of BAME entering a formal disciplinary process
  was 2.07 (twice as likely than white). Last year it was 0 (no BAME staff), a figure
  below "1" would indicate that BAME staff members are less likely than white staff
  to enter the formal disciplinary process.
- Nationally across all Trusts BAME staff were 1.09 times more likely to enter the formal disciplinary process compared to white staff. We are not comparatively better than the "all" NHS Trusts average

BAME STAFF ENTERING FORMAL DISCIPLINARY PROCESS

2.07
NHSAve.(1.09

2023

2021

2022

Chart 5 Likelihood of BAME Staff entering a formal disciplinary process

• Between 2021 and 2025, the likelihood of BAME staff entering a formal disciplinary process fluctuated significantly. It started at 0.43 in 2021, rose sharply to 2.00 in 2022, dipped slightly to 1.74 in 2023, fell to 0.00 in 2024, and then increased again to 2.07 in 2025, the highest in the five-year span. However, it is important to note that this indicator is highly sensitive to small changes in the number of cases, where the involvement of just one or two individuals can significantly impact the data. Overall, the number of formal disciplinary cases has reduced since the introduction of the 'Just and Learning' Culture approach, which has positively affected all staff groups. To ensure any Equality, Diversity and Inclusion (EDI) concerns are appropriately addressed, it is recommended that the Head of ED&I is consulted on complex disciplinary cases going forward.

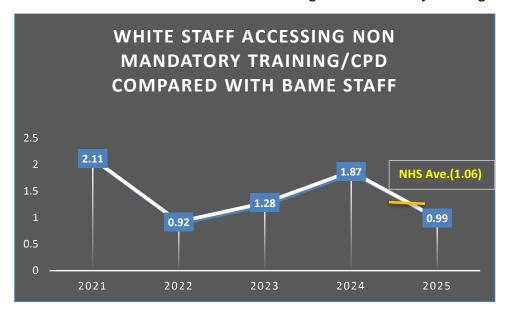
**0** 2024

2025

# Indicator 4 likelihood of white staff accessing non mandatory training/CPD compared with BAME staff

 This year relative likelihood of white staff accessing non-mandatory training and CPD compared to BAME staff is 0.99, compared to 1.87 last year. A value above 1 indicates that white staff are more likely to access non-mandatory training or CPD than BAME staff. There is equity for this indicator.

#### Chart 6 likelihood of white staff accessing non-mandatory training



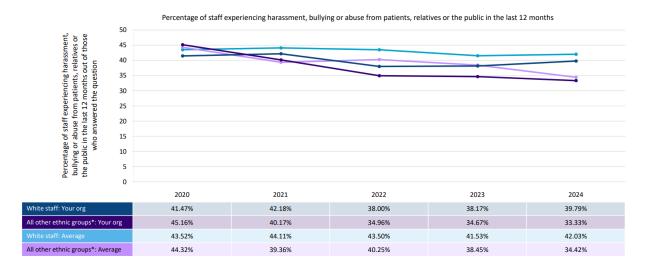
- Increasing the number of BAME staff accessing non-mandatory training and development opportunities is essential for creating a fair, inclusive, and highperforming Trust. It supports career progression, reduces disparities, and builds a diverse leadership pipeline, all of which contribute to the overall success and sustainability of the Trust.
- The 'all' Trusts average was 1.06, the non-adverse range nationally is 0.80 to 1.25. We are achieving parity in relation to the number of BAME staff to access non mandatory/CPD training. To understand and learn we will commence CPD strategic meetings to review results and plan accordingly.

The indicators 5 to 8 are taken from the Staff survey (published March 2024) a year in arrears. The percentage figures are rounded up.

## Indicator 5 percentage of staff experiencing harassment, bullying or abuse from patients or public

- The percentage of BAME staff experiencing harassment, bullying or abuse from patients or the public is 33%, this is better than last year when it was 35%.
   Comparable Ambulance Trusts average of this indicator for BAME staff is 34%.
- This compares with the experience of white staff at 40%, this is also not as good as last year when it was 38%. Comparable Ambulance Trusts average of this indicator for white staff is 42%.

Chart 5 percent of staff experiencing harassment, bullying or abuse from patients or public

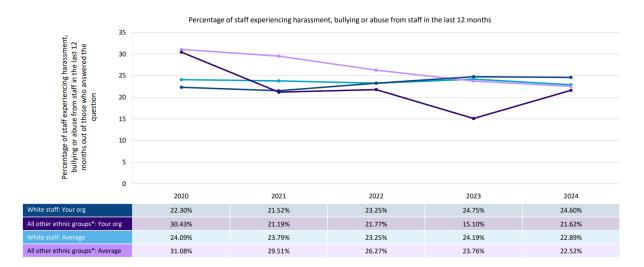


- Reducing the incidence of BAME staff experiencing harassment, bullying, and abuse (BHA) from patients and the public is crucial for creating a safe, inclusive workplace. It ensures the well-being and helps foster a respectful environment, improving job satisfaction, retention, and overall sense of 'belonging'.
- Although the BAME experience has improved from last year the experience of
  white colleagues has deteriorated. The Trust will need to raise awareness and
  address the safety of our staff for example by presenting the figures at level 1
  meetings in context alongside the checklist to create awareness and to recognise
  and challenge inappropriate behaviour.

### Indicator 6 Percentage of BAME staff experiencing harassment, bullying or abuse from staff

- The percentage of BAME staff experiencing harassment, bullying or abuse from staff is 22%, this is comparably worse than last year when it was 15%. Comparable Ambulance Trusts average of this indicator for BAME staff is 23%
- This compares with the white staff experiences at 25%, this is similar to last year when it was 25%. Comparable Ambulance Trusts average for white staff is 23%.

### Chart 6 Percentage of BAME staff experiencing harassment, bullying or abuse from staff

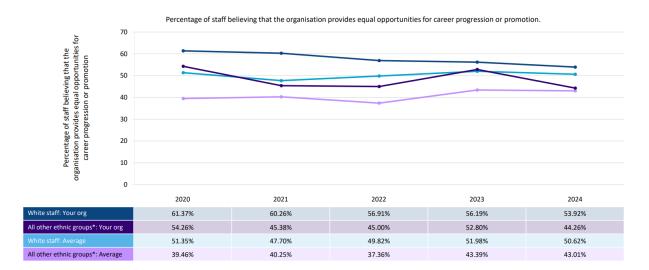


- Harassment, bullying, or abuse of BAME and white staff by colleagues is unacceptable, reflecting a failure in upholding basic standards of respect and equality. It creates a hostile work environment, leading to disengagement, and high turnover. Such behaviour not only devalues BAME employees, eroding their confidence and a sense of belonging, but also perpetuates systemic racism within the Trust.
- The Trust will be ensuring processes are transparent and set out the key routes to reporting incidents including options for anonymous reporting. To encourage a just and learning approach by building in relevant figures in the analysis into our training sessions so they are shared with and educate managers. This will also mean that any increase in reporting will impact on the capacity of the FTSU team.

## Indicator 7 Percentage of staff believing that Trust provides equal opportunities for career progression or promotion

- The percentage of BAME staff that believed that the Trust provides equal opportunities for career progression is 44%. This is comparably worse than last year when it was 53%. Comparable Ambulance Trusts average of this indicator for BAME staff is 43%
- This compares with 54% of white staff who believed that the Trust provides equal opportunities for career progression, this is comparable not as good as last year when it was 56%. Comparable Ambulance Trusts average for white staff is 51%

Chart 7 Percentage of staff believing that Trust provides equal opportunities for career progression or promotion

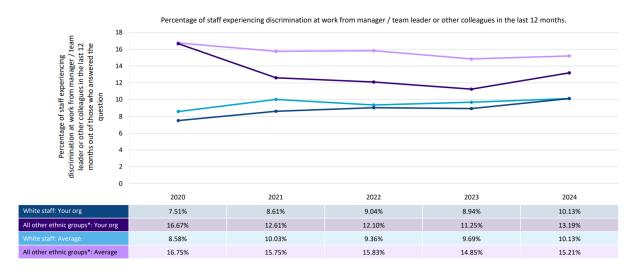


- When staff believe that everyone has equal chances for career progression or promotion, it boosts their motivation and commitment. They are more likely to work hard when they see fair opportunities for advancement. This belief encourages a diverse and inclusive workplace, where talent is recognised equally. It also helps keep skilled employees, as they feel valued and see a future with the organisation, engendering a sense of 'belonging'. Overall, this assurance in fairness creates a positive work environment, improves productivity, and enhances the Trust's reputation as a good place to work.
- We will Provide and promote career pathways specifically for underrepresented (BAME) groups with the aim to Improve the number of BAME colleagues in senior positions. We will do this by reviewing current Career pathways and collaborate with underrepresented groups to understand how to make the packages attractive and improve participation

# Indicator 8 Percentage of BAME staff personally experiencing discrimination at work from a manager / team leader or other colleagues

- The percentage of BAME staff personally experiencing discrimination at work from a manager / team leader or other colleagues is 13%. This is comparably worse than last year when it was 11%. Comparable Ambulance Trusts average for BAME staff at 15%.
- The percentage of white staff personally experiencing discrimination at work from a manager / team leader, or other colleagues is 10%. This is comparably not as good as last year when it was 9%. Comparable Ambulance Trusts average for white staff at 10%.

Chart 10 Percentage of BAME staff personally experiencing discrimination at work from a manager / team leader or other colleagues



- When BAME staff experience discrimination at work from a manager, team leader, or colleagues. Such discrimination not only undermines their professional confidence but also perpetuates a culture of exclusion and inequality.
- The Trust will ensure values and behaviours promote allyship and champion and recognise Upstander behaviour. We will develop "Banter" and Microaggression (inc. Unconscious bias) training package in conjunction with FTSU and EDI Lead taking learnings from TASC. This will be supported by communication campaigns around, bullying and harassment, sexual safety, and banter in the workplace raising awareness, championing positive behaviours, and promoting pathways for reporting unwanted behaviours.

#### Indicator 9 BAME (voting) board membership

As of 31March 2025, 14.3% of voting Board members declared their ethnicity as BAME. There has been a decrease in Board ethnic composition relative to the workforce, a difference (Total board - Overall workforce) from 9.6% last year to 2.9% this year.

### 3. Progress in 2024/2025

We continue to implement and monitor the WRES action plans and have implemented our ED&I strategy which includes our statutory required Equality Objectives. We also published our Annual Public Sector Equality Duty (PSED).

Our key actions and achievements of note over the year have been:

- We have, for the first time produced an Ethnicity Pay Analysis report which is not required to be published and are awaiting guidance form NHS England but will be used as a benchmark for future publication.
- Developed our 'Disability in Employment' policy to define a pathway/flowchart and provide specific guidance on reasonable adjustments
- Continued with regular meetings of the ED&I Steering Group to endorse reports and programmes and enable feedback and guidance from the membership including Staff Networks and Unions
- Achieving over 95% compliance with the ED&I mandatory training
- Refreshed and continue with the 'Good start' Induction training
- Sexual safety Toolkit has been developed and includes a Harassment and Sexual safety Disclosure checklist for managers developed that can be applied to <u>any</u> discrimination disclosure
- The SCAS Sexual Safety Campaign continues to be publicised and to identify measurable impacts
- The Sexual Safety training has been developed and mandated for all managers
- Completed EQIA's for functions, policy, and procedures and uploaded onto the (ED&I) intranet page.
- Provided evidence and successfully passed the BDO (external) Audit for ED&I
- Rolled out the <u>Equality Delivery System (EDS)</u> in active conversations with patients, public, staff, staff networks, community groups and trade unions - to review, score and develop our approach in addressing health inequalities through three domains: Services, Workforce and Leadership. It is driven by data, evidence, engagement, and insight.
- Continued to develop collaborative partnerships to reduce Health inequalities and use the Core20PLUS5 approach (national NHS England approach) to inform action to reduce healthcare inequalities at both national and system level. We have 2 Core20Plus Ambassadors.
- We have met all the NHS statutory and mandatory obligations (WRES, WDRES, EDS, Equality Objectives & Gender Pay Analysis) have completed and published on the website
- We additionally carried out a detailed analysis of directorate and departmental data of Gender pay differentials
- We continue to use social media and highlight the good work that SCAS has done
  to attract more candidates with a disability to SCAS. In addition, we link with the
  themed weeks/days (International Women's Day, Race Equality Week, LGBT+
  history month, etc)

- We advertised many of our roles as having flexible working options, such as parttime work, remote working, job sharing or compressed hours
- Where possible Flexible working for Corporate employees is accommodated.
   Operations have a working group whose purpose is to consider how to incorporate more flexible working options into rotas.
- We have highlighted reasonable adjustment requests at Capability hearings
- Staff Networks as all have Executive level sponsors and will be undergoing specific induction as to their supportive roles
- The Head of ED&I is working with the Staff Networks to arrange SCAS's first 'Staff Network and EDI' event on **15 May 2025**. The event is the *Unity in Diversity: Empowering Every Voice* and is inviting and encouraging SCAS managers to attend.
- Launched 'See ME first' campaign and received pledges for race equality

### 4. Conclusion and next steps

SCAS is committed to driving a culture change, and we recognise that this journey is ongoing. As we move into the new year, we remain focused on addressing inappropriate and unacceptable behaviours while fostering a truly inclusive environment. The actions and interventions highlighted in this report, both behavioural and structural, are vital steps in our transformation.

We understand that meaningful change takes time, energy, and consistency. Last year's action plan produced limited impact, highlighting the need for a more focused and evidence-driven approach. Building on lessons learned, we are developing a revised plan for 2026–27 that targets key areas for improvement with greater precision. Through structured deep dives and enhanced monitoring, the new plan will strengthen accountability, sharpen priorities, and drive measurable progress over the coming year.

#### Next steps:

Over next twelve months, we will focus on the following key actions:

- 'Deep dive' and root mapping of issues to drive actions within this report to ensure consistent improvements and alignment with positive culture change (this may potentially lead to a review of our current recruitment process, triage process implemented for all suspensions and disciplinary cases, leadership development programme for staff from a BAME background and reverse mentoring). However, this will be determined by our review of the data and current action plan.
- Develop our new 'Culture' programme for the Trust
- Update our ED&I strategy for the next 4-year period (2026-2030)
- To adopt and work to meet the NHS England 6 High Impact Actions (HIA)

- Feature the experiences and share life stories from staff highlighting and educating inappropriate and unacceptable behaviours and support an inclusive culture
- Staff Network Executive sponsors to fully engage and work with their Networks on a regular basis
- Continue to support and celebrate diversity events and ensure a Trust wide calendar is actively in place (e.g. Black history & Pride)
- Roll out of Equality Delivery System including identifying SCAS service provisions that will be graded internally and externally
- To publish the Workforce Race Equality Standard report (WRES)
- To publish the Workforce Disability Equality Standard report (WDES)
- Support Flexible working options available particularly for disabled staff
- Continue to seek to improve advertising our campaigns for diversity and challenge ourselves to do better.

This (WRES) report has also given us the opportunity to self-reflect and go beyond 'business as usual'. From this year the Trust will be delivering a 'Culture' programme – Building trust, together and will include ongoing reviews of actions mentioned in this report.



### WRES Action Implementation Plan 2025/26 (Current plan)

Last year's action plan did not deliver the level of improvement expected. While some progress was made, outcomes were limited by inconsistent implementation and insufficient impact monitoring.

We are now replacing it with a revised plan for 2026–27, informed by a series of deep dives to identify root causes and refine priorities. The new plan will set clearer objectives, stronger accountability measures, and a more robust review framework to ensure sustained improvement and measurable outcomes.

Indicator	Objective	Action/s	Timescales	Lead/s
1	Making a 1% improvement for the year, reaching 9.2% by the end of the financial year.	<ul> <li>Communicate purpose and positive benefit of staff updating personal details on the ESR self-service portal.</li> <li>Race Equality Inclusion Network (REIN) to champion ESR declarations through communications via Viva and Intranet</li> </ul>	On-going	People Directorate
	, ,	<ul> <li>Use Trac effectively for monitoring performance at each stage of the recruitment process coupled with Inclusive Recruitment programme which is being rolled out</li> </ul>	On-going	Recruitment
Indicator	Objective	Action/s	Timescales	Lead/s
2	To increase the number of BAME candidates to be successfully	<ul> <li>At least one member of the panel should have undertaken Recruitment Skills Training within the previous 3-year period.</li> </ul>	March 2026	Recruitment
	appointed	For any role that involves management, evidence of	Ongoing	Recruitment
		understanding and behaving inclusively should be an essential competency within the job's person specification.	March 2026	Recruitment
			March 2026	Recruitment

		<ul> <li>Provide and promote career pathways specifically for underrepresented groups</li> <li>EDI Recruitment Champions from our Networking Groups to be trained on recruitment best practice and positive action to then assist on panels ensuring interviews questions are</li> </ul>		
		fair and balanced.		
Indicator	Objective	Action/s	Timescales	Lead/s
3	To reduce number BAME in the disciplinary process	<ul> <li>Create a cross-discipline review panel to focus on disciplinary and capability cases involving colleagues with protected characteristics.</li> </ul>	March 2026	People Directorate
		<ul> <li>To ensure that EDI concerns have been identified and addressed and to provide guidance and expertise on EDI matters, the Head of ED&amp;I should be consulted on complex cases only. (BDO Audit)</li> </ul>	On-Going	People Directorate Head of ED&I
		<ul> <li>Review and improve support for managers when applying policies which can lead to disciplinary or capability outcomes, including guidance on informal processes</li> </ul>	March 2026	People Directorate
Indicator	Objective	Action/s	Timescales	Lead/s
4	To increase the number of BAME staff accessing non-mandatory/CPD	<ul> <li>Advertise all CPD and training opportunities within Staff Networks. (such as embedding a link on their Share Points). introduced this so that there is a one stop shop for booking development.</li> </ul>	March 2026	Heads of Education
	training	<ul> <li>Ensure accurate data is gathered and reviewed monthly to include demographics and internal and external opportunities accessed</li> </ul>	Monthly September 2026	Heads of Education  Heads of Education

	•	Review the variety and spread (according to role and	
		professional group) of CPD opportunities	

### Indicators 5 – 9 taken from Staff Survey 2024 (published March 2025)

Indicator	Objective	Action/s	Timescales	Lead/s
5	Reduce the incidence of BAME staff experiencing BHA from patients and public harassment, bullying and abuse from	<ul> <li>Develop and deliver communication campaigns around, bullying and harassment, sexual safety, and banter in the workplace - raising awareness, championing positive behaviours, and promoting pathways for reporting unwanted behaviours.</li> <li>Report a dashboard for the identification of staff with protected characteristics reporting incidents to the ED&amp;I Steering group</li> </ul>	March 2026 Half-yearly	Comms  Head of Risk and Security
	patients and the public			
Indicator	Objective	Action/s	Timescales	Lead/s
6	To reduce BAME staff experiencing harassment,	<ul> <li>Develop and deliver communication campaigns around, bullying and harassment, sexual safety, and banter in the workplace - raising awareness, championing positive behaviours, and promoting pathways for reporting unwanted behaviours.</li> </ul>	March 2026	Comms
6	To reduce BAME staff experiencing	bullying and harassment, sexual safety, and banter in the workplace - raising awareness, championing positive		

		<ul> <li>Embed Upstander and Allyship Behaviours in all levels of the organisation</li> <li>Report a dashboard for the identification of staff with protected characteristics reporting incidents to the ED&amp;I Steering group</li> </ul>	March 2026 Half-yearly	People Directorate  Head of Risk and Security
				,
Indicator	Objective	Action/s	Timescales	Lead/s
7	To innovate and promote opportunities for career progression or promotion	<ul> <li>Improve interest and uptake of career development opportunities from BAME colleagues</li> <li>Review participants of training groups to maximise diversity where possible</li> <li>Review current Career pathways and collaborate with underrepresented groups to understand how to make the packages attractive and improve participation</li> <li>Provide and promote career pathways specifically for underrepresented groups</li> </ul>	September 2026 September 2026 June 2026 September 2026	Education  Education  People Directorate/ Education  Recruitment
		Actively advertise and promote roles within internal Staff Networks	February 2026	Recruitment REIN
Indicator	Objective	Action/s	Timescales	Lead/s
8	To actively reduce BAME staff personally experiencing	<ul> <li>Support leaders to improve local communication and engagement with staff, considering the needs of under- represented groups.</li> </ul>	June 2026	Comms/FTSU
	discrimination at work from a manager / team leader or other	<ul> <li>Develop "Banter" and Microaggression (inc. Unconscious bias) training package in conjunction with FTSU and EDI</li> </ul>	June 2026 March 2026	Education/EDI & FTSU People
	colleagues			Directorate

		<ul> <li>Enhance and build on the cultural awareness offering for all staff and increase awareness of their own impact as a leader at each level of training</li> <li>Ensure values and behaviours promote allyship and champion and recognise Upstander behaviour</li> <li>Hold direct engagement sessions with Underrepresented groups through engaging with staff networks. Improve our Listening culture Improve Trust in the organisation</li> <li>Execs to hold themselves and Leaders to account for cultural change. To be visible in championing organisational values and demonstrate behaviours.</li> </ul>	June 2026  March 2026  March 2026	People Directorate People Directorate Executive
Indicator	Objective	Action/s	Timescales	Lead/s
9	Actively promote Board diversity	Board members to have their own SMART Equality Objectives and have them as a part of their appraisal	on-going	Board